

## TRANSMISSION FAX CERTIFICATE OF

Fransmission Date:	26 March 2007	Docket:	1009-039
--------------------	---------------	---------	----------

Transmission #: 1 of Total Transmissions: 1

Pages in this Transmission: 11 of Total Pages Transmitted: 11

I hereby certify that the following correspondence is being facsimile transmitted, via one or more transmissions as described above, to the attention of the Director of the US Patent and Trademark Office on the above date via the following facsimile number: 571-273-8300.

Request For Continued Examination (RCE) Transmittal (PTO/SB/30) (1 sheet)

Preliminary Amendment (7 sheets)

Fee Transmittal Form (PTO/SB/17) (1 sheet)

Credit Card Payment Form (PTO-2038) (1 sheet)

Application Number

10/664,754

Confirmation No.:

4113

Filing Date:

18 September 2003

Document Submission Date: 26 March 2007

Art Unit: 2178

Examiner: Termanini, Samir

Inventor: Li, Yufeng

Docket:

2002P15652US01 (1009-039) Kelly B. Smoken

26 Mar 2007

Kelly B. Smoker

Date

Name of Certifier

Signature of Certifier

RECEIVED CENTRAL FAX CENTER10/11 03/26/07 11:02 am To: Central FAX USPTO @ 571-273-8300 From: Mike Haynes

MAR 2 6 2007

Approved for use through 07/31/2008, OMB 0661-0032 U.S. Patent and Tradament Office; U.S. DEPARTMENT OF COMMERCE Under the Panarwork Reduction Act of 1996, no persons are required to respond to a collection of information unless it displays a valid OMP control number Effective on 12/08/2004. Camplete if Known pursuant to the Consolidated Appropriations Act. 2005 (M.R. 4816). Application Number 10/664,754 TRANSM 18 September 2003 Filing Date For FY 2005 LI, Yufeng First Named Inventor Termanini, Samir Examinar Name Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2178 790.00 TOTAL AMOUNT OF PAYMENT Attorney Docket No. 2002P15652US01 (1009-039) METHOD OF PAYMENT (check all that apply) Chock Credit Card Money Order Other (please identify): Deposit Account Name: Michael N. Haynes ✓ Doposit Account Deposit Account Number: 50-2504 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card Information and authorization on PTO-2038. **FEE CALCULATION** 1. BABIC FILING, SEARCH, AND EXAMINATION FEES **EXAMINATION FEES** FILING FEES SEARCH FEES Small Entity **Small Entity Small Entity** Fees Paid (\$) Fee:(\$) **Application Type** Fee.(\$) Fee (\$) Fee (8) Fee (f) 200 Utility 300 150 500 250 100 200 100 130 65 Design 100 50 160 Plant 200 100 300 150 80 600 300 500 300 Reissue 150 250 **Provisional** 200. 100 2. EXCESS CLAIM FEES **Small Entity** Fee (8) Fee (\$) Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 2.5 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 180 Multiple dependent claims Multiple Dependent Claims Total Claims Extra Claims O Fee (\$) Fee Paid (\$) .- 20 or HP € HP-= highest number of total claims paid for, if greater than 20 0 Fee Paid (8) (8) Extra Craims indep. Claims - 3 or HP = HP = highast number of independent claims paid for, if greater than 3: If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof

(round up to a whole number) Eee Pald (8) Total Sheets Extra Sheats

SUBMITTED BY				
Signature	midel 71. Hagnes	Registration No. 40,014	Telephone 434-972-9988	
Name (Print/Type)	Type) Michael N. Haynes		Date. 26 Mar 2007	

\_ (round up to a whole number)

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete. Including gathering, preparing, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or auggestions for motion gathering, preparing, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or auggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Sox 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

if you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Fees Paid (\$)

790

Non-English Specification \$130 fee (no small emity discoum)

Other: Request for Continued Examination (RCE)

4. OTHER FEE(S)